AMENDMENT UNDER 37 C.F.R. § 1.111 U.S. APPLN. NO.: 09/965,890

REMARKS

Claims 1-6, 8-18, 20-24 and 27-33 are pending in the application. By this Amendment, new claims 30-33 are added. Claim 29 is rejected under 35 U.S.C. § 102(e) as being anticipated by Mayer, III et al. (U.S. Patent No. 6,692,337; hereinafter "Mayer"). Claims 1 and 4-5 are rejected under 35 U.S.C. § 103(a) as being unpatentable over Mayer. Claims 3, 6, 9-11, 15 and 24 are rejected under 35 U.S.C. § 103(a) as being unpatentable over Mayer in view of Suzuki (U.S. Patent No. 6,344,836; hereinafter "Suzuki"). Claims 2, 8 and 16-18 are rejected under 35 U.S.C. § 103(a) as being unpatentable over Mayer in view of Inbar (U.S. Patent No. 6,119,380; hereinafter "Inbar"). Claim 12 is rejected under 35 U.S.C. § 103(a) as being unpatentable over Mayer in view of Yishida et al. (U.S. Patent No. 5,617,112; hereinafter "Yishida"). Claims 13-14, 20-23 and 27-28 are rejected under 35 U.S.C. § 103(a) as being unpatentable over Mayer in view of Berman et al. (U.S. Patent No. 6,448,956; hereinafter "Berman"). Applicant submits the following arguments in traversal of the claim rejections.

Rejection of Claim 29 under § 102(e) by Mayer

Applicant respectfully submits that claim 29 is patentable because each and every element of the claim is not disclosed or suggested by Mayer. For example, claim 29 recites a medical image display system comprising, *inter alia*:

a control unit for controlling said plurality of flat panel displays,

wherein said control unit is incorporated in the casing, said control unit

controlling said plurality of flat panel displays, and

wherein the control unit controls image data signals displayed on the plurality of flat panel displays.

43.

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In contrast, Mayer fails to disclose or suggest a control unit incorporated in the casing, as claimed. In the sections of the reference cited by the Examiner, Mayer merely discloses that the control unit may be either "mounted on" the chassis 201, the base 212 or the support 210 and does not disclose that the control unit is incorporated in the casing, as claimed. Col. 4, lines 38-

Even if one argues that Mayer discloses a multi-panel video display including an "integrated control unit," the reference still does not disclose that the control unit is incorporated in a casing. A control unit which is fixedly attached via cable to the multi-panel video display may still be integral to the multi-panel display, but still not incorporated in the casing. Therefore, claim 29 is patentable.

Rejection of Claims 1 and 4-5 under § 103(a) over Mayer

Applicants respectfully submit that claim 1 is patentable because the Examiner has failed to establish a *prima facie* case of obviousness. In the Office Action, the Examiner concedes that Mayer fails to disclose a medical image display system wherein in each of said plurality of flat panel displays, a display screen size in a diagonal line direction is 10 inches to 25 inches, a pixel size is $50 \,\mu \text{m}$ to $240 \,\mu \text{m}$, the number of pixels is $1200 \,\text{pixels} \times 1600 \,\text{pixels}$ or more, and an aspect ratio is 1 to 4/3. The Examiner, however, argues that it would have been obvious to have a display screen size with the aforementioned features because such a modification would have involved a mere change in the range of the system. The Examiner then argues that a change in range is generally recognized as being within the level or ordinary skill in the art. In other words, the Examiner essentially argues that it would have been obvious because it would merely involve a change in range.

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Applicant respectfully submits that such reasoning does not provide support in rejecting claims under § 103, especially given that the Examiner does not provide any motivation as to why one skilled in the art would make such change in range in the first place. Without such motivation, Mayer cannot possibly teach, suggest or provide motivation for the aforementioned features of claim 1.

In addition, there is nothing in Mayer to indicate that the aforementioned features of the invention are result-effective variables, a necessary precursor to any determination that the changes in the ranges would be within the level of one of ordinary skill in the art. See MPEP 2144.05(II)(B).

Even assuming arguendo, that Mayer suggests having the display screen size as claimed, having such display screen sizes would necessarily require having a particular power source and a control unit capable of supporting the claimed display screen size. In Mayer, however, there is nothing to suggest that the control unit cited by the Examiner as corresponding to the claimed control unit, can support the display screen size as claimed.

For at least the above reasons, claim 1 is patentable.

Claims 4 and 5, which depend from claim 1, are patentable for at least the reasons submitted for claim 1.

Rejection of Claims 3, 6, 9-11, 15 and 24 under § 103(a) over Mayer in view of Suzuki Claims 3, 6, 9-11, 15 and 24, which depend from claim 1, are patentable for at least the reasons submitted for claim 1 and because Suzuki fails to make up for the deficiencies of Mayer.

Further, claim 6 is patentable because Suzuki and Mayer fail to teach, suggest or provide motivation for a medical image display system, wherein at least one of said plurality of flat panel AMENDMENT UNDER 37 C.F.R. § 1.111 U.S. APPLN. NO.: 09/965,890

displays has at least one selected from the group consisting of a screen size, a pixel size, the number of pixels, and an aspect ratio, which is different from the other of said plurality of flat panel displays.

In addition, claim 9 is patentable because Mayer and Suzuki fail to teach, suggest or provide motivation for an image display system wherein said plurality of flat panel displays include one or more flat panel displays for displaying a color image and one or more flat panel displays for displaying a monochrome image that coexist in the casing, and said control unit judges whether an image to be displayed is a color image or a monochrome image to allow a corresponding flat panel display to display the image. Applicant requests the Examiner to specifically point out how the above features of claim 9 are obvious in view of Mayer and Suzuki.

Claim 10 is also patentable because Mayer and Suzuki fail to teach, suggest or provide motivation for a medical image display system, wherein said plurality of flat panel displays include one or more flat panel displays for displaying a color image, and one of said one or more flat panel displaying the color image is used as an interface for controlling image displaying in each of the others of said plurality of flat panel displays.

Further, claim 11 is patentable because Mayer and Suzuki fail to teach, suggest or provide motivation for a medical image display system, wherein in accordance with designation of an image displayed on one of said plurality of flat panel displays, at least one of an image obtained by enlarging the displayed image and an image obtained by image-processing the displayed image is displayed on at least one of the others of said plurality of flat panel displays.

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Applicant also requests the Examiner to specifically point out where Mayer and Suzuki teaches or suggests these features.

Rejection of Claims 2, 8 and 16-18 under § 103(a) over Mayer in view of Inbar

Applicant submits that claim 2 is patentable because the Examiner has failed to show how the combination of Mayer and Inbar teaches, suggests or provides motivation for a medical image display system, wherein at least one of said plurality of flat panel displays has a holding unit for holding a medical film to superpose it on an image displaying screen, and has a function for moving a pointer in a state that white color is displayed on an entire region of the image displaying screen of said at least one of the plurality of flat panel displays having the holding unit. Although it is not entirely clear, it appears that the Examiner is arguing that it would be obvious to use the spring-loaded film-holder clips along a top edge of a viewing surface in the display system of Mayer to hold the medical film more stably.

Applicant respectfully submits that the above arguments of the Examiner do not explain why one skilled in the art would use the individual display panels of Mayer as a light box.

Rather, the purpose of the display panels in Mayer is display video images would necessarily teaches away from using these display panels as light boxes.

As for claim 8, the Examiner has not provided the necessary motivation to show why one skilled in the art would combine the video display system of Mayer with the light box of Inbar. Without such motivation, a prima facie case of obviousness cannot established, and thus, claim 8 is patentable.

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Rejection of Claim 12 under § 103(a) over Mayer in view of Yishida

Claim 12, which depends from claim 1, is patentable for at least the reasons submitted for

claim 1 and because Yishida fails to make up for the deficiencies of Mayer.

An embodiment of the present invention relates to a medical image display system.

Accordingly, for appropriate diagnoses based on monochrome medical images, luminance values

of the displays need to be set higher to the maximum to display subtle differences of the density

sharply, and also luminance gradation characteristics of the displays needs to be equalized so that

the portions of the same density are displayed alike, in images displayed in plurality of displays.

Mayer and Yishida, however, fail to teach, suggest or provide motivation for such

features as recited in claim 12, and therefore, claim 12 is patentable over the cited references.

Rejection of Claims 13-14, 20-23 and 27-28 under § 103(a) over Mayer in view of

Berman

Claims 13-14, 20-23 and 27-28, which depend from claim 1, are patentable for at least

the reasons submitted for claim 1 and because Berman fails to make up for the deficiencies of

Mayer.

Further, claims 13, 20 and 21 are patentable because Mayer in view of Berman fail to

teach, suggest or provide motivation for a medical image display system further comprising an

output unit for outputting a hard copy. Nowhere in Berman is there any mention of an output

unit as claimed.

Applicant submits new claims 30-33 to more fully claim the invention. The new claims

30-33 are patentable for at least the reasons submitted in their respective base claims and for the

recitations cited therein.

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U.S. APPLN. NO.: 09/965,890

With regard to the patentability of claims 30 and 31, Applicant submits that in an embodiment of the present invention relating to a medical system, one display being affected by a light from the other display is less than desirable for displaying diagnostic images. In the present invention of a medical system, if flat panel displays are provided at an angle, the light from the display, wherein the image has more white color, strikes the surface of the other display, wherein the image which has more black. The incident light from the display effectively becomes stray light that makes it difficult to see the display of black color on the other display, which may result in the problem of a difficult diagnosis or a misdiagnosis.

In view of the above, reconsideration and allowance of this application are now believed to be in order, and such actions are hereby solicited. If any points remain in issue which the Examiner feels may be best resolved through a personal or telephone interview, the Examiner is kindly requested to contact the undersigned at the telephone number listed below.

The USPTO is directed and authorized to charge all required fees, except for the Issue Fee and the Publication Fee, to Deposit Account No. 19-4880. Please also credit any overpayments to said Deposit Account.

Respectfully submitted,

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Date: November 3, 2005

AMENDMENT UNDER 37 C.F.R. § 1.111 U.S. APPLN. NO.: 09/965.890

REMARKS

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a control unit for controlling said plurality of flat panel displays,

wherein said control unit is incorporated in the casing, said control unit controlling said plurality of flat panel displays, and

wherein the control unit controls image data signals displayed on the plurality of flat panel displays.

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In contrast, Mayer fails to disclose or suggest a control unit incorporated in the casing, as claimed. In the sections of the reference cited by the Examiner, Mayer merely discloses that the control unit may be either "mounted on" the chassis 201, the base 212 or the support 210 and does not disclose that the control unit is incorporated in the casing, as claimed. Col. 4, lines 38-43.

Even if one argues that Mayer discloses a multi-panel video display including an "integrated control unit," the reference still does not disclose that the control unit is incorporated in a casing. A control unit which is fixedly attached via cable to the multi-panel video display may still be integral to the multi-panel display, but still not incorporated in the casing.

Therefore, claim 29 is patentable.

Rejection of Claims 1 and 4-5 under § 103(a) over Mayer

Applicants respectfully submit that claim 1 is patentable because the Examiner has failed to establish a *prima facie* case of obviousness. In the Office Action, the Examiner concedes that Mayer fails to disclose a medical image display system wherein in each of said plurality of flat panel displays, a display screen size in a diagonal line direction is 10 inches to 25 inches, a pixel size is $50 \,\mu \text{m}$ to $240 \,\mu \text{m}$, the number of pixels is $1200 \,\text{pixels} \times 1600 \,\text{pixels}$ or more, and an aspect ratio is 1 to 4/3. The Examiner, however, argues that it would have been obvious to have a display screen size with the aforementioned features because such a modification would have involved a mere change in the range of the system. The Examiner then argues that a change in range is generally recognized as being within the level or ordinary skill in the art. In other words, the Examiner essentially argues that it would have been obvious because it would merely involve a change in range.

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In addition, there is nothing in Mayer to indicate that the aforementioned features of the invention are result-effective variables, a necessary precursor to any determination that the changes in the ranges would be within the level of one of ordinary skill in the art.

See MPEP 2144.05(II)(B).

Even assuming arguendo, that Mayer suggests having the display screen size as claimed, having such display screen sizes would necessarily require having a particular power source and a control unit capable of supporting the claimed display screen size. In Mayer, however, there is nothing to suggest that the control unit cited by the Examiner as corresponding to the claimed control unit, can support the display screen size as claimed.

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Claims 3, 6, 9-11, 15 and 24, which depend from claim 1, are patentable for at least the

reasons submitted for claim 1 and because Suzuki fails to make up for the deficiencies of Mayer.

Further, claim 6 is patentable because Suzuki and Mayer fail to teach, suggest or provide motivation for a medical image display system, wherein at least one of said plurality of flat panel

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displays has at least one selected from the group consisting of a screen size, a pixel size, the number of pixels, and an aspect ratio, which is different from the other of said plurality of flat panel displays.

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Further, claim 11 is patentable because Mayer and Suzuki fail to teach, suggest or provide motivation for a medical image display system, wherein in accordance with designation of an image displayed on one of said plurality of flat panel displays, at least one of an image obtained by enlarging the displayed image and an image obtained by image-processing the displayed image is displayed on at least one of the others of said plurality of flat panel displays.

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Rejection of Claim 12 under § 103(a) over Mayer in view of Yishida

Claim 12, which depends from claim 1, is patentable for at least the reasons submitted for claim 1 and because Yishida fails to make up for the deficiencies of Mayer.

An embodiment of the present invention relates to a medical image display system.

Accordingly, for appropriate diagnoses based on monochrome medical images, luminance values of the displays need to be set higher to the maximum to display subtle differences of the density sharply, and also luminance gradation characteristics of the displays needs to be equalized so that the portions of the same density are displayed alike, in images displayed in plurality of displays.

Mayer and Yishida, however, fail to teach, suggest or provide motivation for such features as recited in claim 12, and therefore, claim 12 is patentable over the cited references.

Rejection of Claims 13-14, 20-23 and 27-28 under § 103(a) over Mayer in view of Berman

Claims 13-14, 20-23 and 27-28, which depend from claim 1, are patentable for at least the reasons submitted for claim 1 and because Berman fails to make up for the deficiencies of Mayer.

Further, claims 13, 20 and 21 are patentable because Mayer in view of Berman fail to teach, suggest or provide motivation for a medical image display system further comprising an output unit for outputting a hard copy. Nowhere in Berman is there any mention of an output unit as claimed.

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